Current Prin	cipal Place of Business:		156962	010900
LEHIGH ACRES				
	2, 12 00011			
Current Mai	ing Address:			
4613 LEE BL	VD			
LEHIGH ACF	RES, FL 33971 US			
FEI Number: 81-1175588			Certificate of Status Des	sired: No
Name and A	ddress of Current Registered Agent:			
MADE IN BRAZ 10231 METRO				
STE 104 FORT MYERS,	FL 33966 US			
The above named	entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Fl	lorida.
	entity submits this statement for the purpose of changing its regis : MARIA M. CALDAS-LOPES	stered office or regis	tered agent, or both, in the State of Fl	<sup>lorida.</sup> 04/16/2019
		stered office or regis	tered agent, or both, in the State of Fi	
	: MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Fi	04/16/2019
SIGNATURE	: MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Fr	04/16/2019
SIGNATURE	MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent ctor Detail :			04/16/2019
SIGNATURE Officer/Direc Title	MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent Ctor Detail : P	Title	VP	04/16/2019
SIGNATURE Officer/Direc Title Name Address	MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent Ctor Detail : P DA SILVA, MARCOS A	Title Name Address	VP DA SILVA, MIRIAN	04/16/2019
SIGNATURE Officer/Direc Title Name Address	MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent Cor Detail : P DA SILVA, MARCOS A 4613 LEE BLVD	Title Name Address	VP DA SILVA, MIRIAN 4613 LEE BLVD	04/16/2019
SIGNATURE Officer/Direc Title Name Address	MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent Cor Detail : P DA SILVA, MARCOS A 4613 LEE BLVD	Title Name Address	VP DA SILVA, MIRIAN 4613 LEE BLVD	04/16/2019
SIGNATURE Officer/Direc Title Name Address	MARIA M. CALDAS-LOPES Electronic Signature of Registered Agent Cor Detail : P DA SILVA, MARCOS A 4613 LEE BLVD	Title Name Address	VP DA SILVA, MIRIAN 4613 LEE BLVD	04/16/2019

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DA SILVA, MARCOS A

Electronic Signature of Signing Officer/Director Detail

## **Secretary of State** 156062018000

**FILED** 

Date

04/16/2019

Ρ

DOCUMENT# P16000001179

Entity Name: QUALITY HAND WORK INC